

## ITEMIZED CONTRIBUTIONS - PAYROLL SCHEDULE 2A - 2

1. Committee I.D. Number	
2 Committee Name	

2. Committee Name

USE THIS FORM ONLY FOR CONTRIBUTIONS THAT ARE PAYROLL DEDUCTIONS FROM INDIVIDUALS - ALL CONTRIBUTORS HAVE THE SAME EMPLOYER AND BUSINESS ADDRESS

3. NAME OF EMPLOYER & ADDRESS:					
4. Please enter contributor's	s name and address:		7. Amount	8. Cumulative for Calendar year for Each Contributor (Through date of receipt)	
Name & Address: Contribution # 1	5. Date of Receipt			Communication (Timodgi) data di receipi,	
	ve, please provide occupation:				
Contribution # 2 Name & Address:	5. Date of Receipt				
6. If over \$100.00 cumulat	ive, please provide occupation:				
Contribution # 3 Name & Address:	5. Date of Receipt				
	ve, please provide occupation:				
Contribution # 4 Name & Address:	5. Date of Receipt				
	ive, please provide occupation:				
Contribution # 5 Name & Address:	Date of Receipt  ——				
6. If over \$100.00 cumulati	ve, please provide occupation:				
Contribution # 6 Name & Address:	5. Date of Receipt				
	ve, please provide occupation:				
Contribution # 7 Name & Address:	5. Date of Receipt				
	ve, please provide occupation:				
Contribution # 8 Name & Address:	5. Date of Receipt —				
6 If over \$100 00 cumulat	ve, please provide occupation:				
	A Promote Programme accompanion				
		Page Subtotal		<u> </u>	
		Grand Total of All Schedules 2A-2 Complete on last page of Schedule	Enter this total	on	
Page of			line 3 of summary Page		

## **INSTRUCTIONS FOR COMPLETING SCHEDULE 2A-2**

**ITEM 3: NAME OF EMPLOYER:** All of the contributors on each Schedule 2A-2 have the same employer, and therefore the name of the employer is only listed once at the top of the schedule.

**ITEM 4: BUSINESS ADDRESS:** For all of the contributors that have the same business address, that information can be listed once at the top of the Schedule. If the contributors are not all employed at the same address, use a separate Schedule 2A-2 for each business address.

**ITEM 5: CONTRIBUTOR'S NAME AND ADDRESS:** Enter last name first, first name and middle initial, street and number, city, state and zip code.

**ITEM 6: DATE OF RECEIPT:** Enter the date the contribution was deducted from the contributor's payroll.

**ITEM 7: OCCUPATION:** If the person's contribution is \$100.01 or more in a calendar year, enter the contributor's occupation in this space.

**ITEM 8: AMOUNT:** Enter the amount of the contribution.

ITEM 9: CUMULATIVE: Enter the cumulative contributions for each contributor for the calendar year.